FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000053887 (2)

MARIO'S ICE CREAM, INC.

FILED Apr 21 1997 8:00am Secretary of State



Principal Place of Business			Mailing Address						
1214 PALM COAST F			1214 PALM COAST PARKWAY PALM COAST FL 32137-4700						
						3. Date Incorporated or Qualified 07/10/1995		e of Last 5/1996	Report
2. Principal P	lace of Business	2a. M	ailing Address			4. FEI Number			Applied For
21		26	26)			59-3326826	59-3326826 Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, otc.			5. Certificate of Status Desired	s Desired \$8.75 Additional		
22		27				5. Certificate of Status Desired		Fee F	Required
City & State	е	Ci	City & State			6. Election Campaign Financing \$5.00 May Be			May Be
23		28				Trust Fund Contribution		Addec	d to Fees
Zip	Country	Zij	p	Country	у	8. This corporation has liability for i			s. 199.032,
24	25	29	····	30		•	Yes 🗌		
	9. Name and Address of Cur	rrent Register	ed Agent			10. Name and Address of New Re	gistered A	gent	
	GLAS, TIMOTHY K			81	Name				
	L or ida Park Drive North			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
PALA	A COAST FL 32137								
				83	H				
				84	l City			85 Zip	o Code
				1	1 - 7		FL	1	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.	1508, Florida Statu	tes, the abov	e named co	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of d	changing	its registered
office or r	egistered agent, or both, in the Si Im familiar with, and accept the of	tate of Florida. oligations of, Si	Such change was action 607.0505. F	aumorizea b Iorida Statute	y the corpor :8.	ation's board of offoctors, I hereby accep	a ine appo	immem a	is registered
••			,						
SIGNATURE	Signature, typed or printed hame of registeres	d agent and little if ag	plicable (NO	TL Registered Ag	ent signature req	puired when reinstating)	DATE		
12.	OFFICERS	AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D		DELETE	1.1 TALE			Ĺ	Change	Addition
NAME	Mosquera, Mario			1.2 Name					
STREET ADDRESS	65 FORTUNE LANE			1.3 STREE	1 ADDRESS				
CITY-ST-ZIP	PALM COAST FL 32137			1.4 CITY-	\$1 - ZIP				
TITLE	D		□ DELFTE	2 1 TITLE				Change	Addition
NAME	Mosquera, Ibraimma			2.2 NAME					
STREET ADDRESS	65 FORTUNE LANE			2.3 STREE	T ADDRESS				
CITY-ST-ZIP	PALM COAST FL 32137			2. 4 CITY-	-ST-ZIP				
TITLE			DELETE	31 TITLE			Ī	Change	Addilio
NAME				32 NAME					
STREET ADDRESS				3.3 STREE	1 ADDRESS				
CITY-ST-ZIP				3.4. CITY-	-ST-7IP				
TITLE			DELETE	4 1 TH L F		The state of the s		Change	Additio
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	T ADDRESS				
CITY-ST-ZIP				4.4 CITY-	S1 - 718				
TITLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 S1REE	1 ADDRESS				
CITY-ST-ZIP				5.4 CITY-					
TITLE			DELETE	6.1 TITLE			· · · · · · · [Change	Addition
NAME				6.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				6.4 CITY-					
	by partiful that the information are	plied with this t	iling does not gue			ed in Section 119.07/3)(i) Florida Statute	e I further	cortify the	at the

I have been been supplied with this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

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